

**Attention Senior Clubs and County Council on Aging!**

Please complete the following information if your senior citizen club or county council on aging has recently elected new officers. The information should be sent to: Regional Aging Service Program Administrator, Northeast Human Service Center, 151 S. 4<sup>th</sup> Street, Suite 401, Grand Forks, ND 58201.

**NAME AND ADDRESS OF SENIOR ORGANIZATION:**

---

**NAME AND ADDRESS OF NEW PRESIDENT:**

---

**TELEPHONE NUMBER OF PRESIDENT:**

---

*PLEASE SHARE THIS NEWSLETTER WITH YOUR MEMBERS!!!*

# NORTH DAKOTA AGING and DISABILITY Resource-LINK

*Your Care Choice Connection to Aging and Disability Resources*

**1-800-451-8693**

**[www.carechoice.nd.gov](http://www.carechoice.nd.gov)**

Regional Aging Service Program Administrator  
Northeast Human Service Center – Aging Services  
151 S. 4<sup>th</sup> Street, Suite 401  
Grand Forks, North Dakota 58201  
(701) 795-3000 Toll Free: 1-888-256-6742  
Fax (701) 795-3050

RETURN SERVICE REQUESTED



Please correct your mailing list

Please delete my name from list ATTACH THE OLD MAILING LABEL

# AGING SERVICES

Volume XII Number 4

Region IV Serving Grand Forks, Nelson, Pembina & Walsh Counties

FALL 2010

## INSIDE THIS ISSUE

Flu.....	p.2
HIV/AIDS Older Adults.....	p.4
New Health Care Law.....	p.7
HCBS.....	p.10
Telephone Numbers.....	p.11

### *Aging Services Newsletter*

*Please share this newsletter with a friend, coworkers, at your senior center, post on a bulletin board, etc....If you wish not to be on the mailing list for the newsletter please call 795-3000 and ask for Patricia Soli. You are welcome to submit any news you may have regarding services and activities that are of interest to seniors in this region. Northeast Human Service Center makes available all services and assistance without regard to race, color, national origin, religion, age, sex or handicap and is subject to Title VI of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973 and the Age Discrimination Act of 1975 as amended.*

*Northeast Human Service Center is an equal opportunity employer. This publication can be made available in alternate formats.*



### **MISSION STATEMENT:**

In a leadership role, Aging Services will actively advocate for individual life choices and develop quality services in response to the needs of vulnerable adults, persons with physical disabilities, and an aging society in North Dakota.

## **“TAKING CONTROL with Jim Murphy”, Diabetes Patient Speaks Out About Taking Control of the Disease.**

Join the Cavalier Senior Citizens to learn how you can live a healthier life, from a “real person” with diabetes who has “walked in your shoes”.

Jim Murphy is an A1C Champion. He has diabetes and will share his personal experiences and helpful insights on successfully managing diabetes. If you haven't already, please take the first step toward living a healthier life.

Any questions contact Stacie Metelmann at the Altru-Clinic 265-8338 with any questions.

**Tuesday, September 28, 2010**

**2:00 pm – 3:00 pm  
Cavalier Senior Citizens  
Community Room**



## **Region IV 2010 Flu Shot Clinic**

**Altru Clinic – Cavalier:**  
701-265-8338

Walk in flu shot clinic:  
September 20<sup>th</sup> -24<sup>th</sup>

- The clinic will be walk-in
- Offered daily Monday through Friday 9 am to 5 pm
- Watch for some extended times on those days

**Senior Citizen Health and Wellness Sites will offer flu shots this year. Contact Stacie Metelmann, RN, 701-265-8338 or 701-265-3358**

- Drayton: September 27<sup>th</sup>, 9am-2pm
- Walhalla: October 4<sup>th</sup>, 9am-1pm
- Neche: October 11<sup>th</sup>, 9:30am – 12 noon
- Pembina: October 11, 1am-2:30pm
- Cavalier: October 12<sup>th</sup>, 8:30am-2pm
- St. Thomas: October 20<sup>th</sup>, 8:30am – 11:30pm

**Altru Health System:**  
701-780-5000

Grand Forks is also offering on campus walk-in clinics the week of **October 18<sup>th</sup> - 25<sup>th</sup>**. Watch for further details of times and on campus locations.

GF Health Department:  
787-8100

## **Flu (Influenza)**

### **What is influenza?**

Influenza or “flue” is a respiratory disease caused by a virus. There are two main types of flu viruses – A and B. Each type includes many related viruses or strains, each slightly different from the others. Type A epidemics are generally more frequent and severe than those of Type B.

### **Who is at risk for influenza?**

People of all ages can get the flu.

### **What are the symptoms of influenza?**

Flu symptoms include fever, chills, headache, dry cough and aching in the back, arms and legs. The risk of developing severe complications, such as pneumonia and death, increased with age (especially in people older than 65) or for individuals with chronic medical conditions (such as diabetes; diseases of the heart, lungs or kidneys; severe anemia; or other chronic diseases that weaken the immune system, AIDS or HIV infection).

### **How soon do symptoms appear?**

Symptoms usually appear within one to three days after being exposed.

### **How is influenza spread?**

Flu is spread from person to person when a person with flu coughs, sneezes or talks, spreading the droplets through the air.

### **When and for how long is a person able to spread the disease?**

An individual is able to spread the disease as long as he or she is infected with the virus. This is typically three to five days in adults.

### **How is a person diagnosed?**

The diagnosis usually is based on the appearance of classic signs and symptoms. However, laboratory tests are available to confirm this diagnosis.

### **What is the treatment?**

Antibiotics will not work against the flu; however, antiviral drugs are available for the treatment of flu. Often treatment of symptoms is recommended, such as bed rest, drinking more than the usual amount of liquids and taking pain relievers to help reduce the discomfort of illness.

### **Does past infection make a person immune?**

People do build up immunity against the different types of flu, but the immunity can wane over time. Because flu viruses change over time, repeated infections can occur.

### **Should adults be excluded from work, group settings or other activities if they have influenza?**

Yes. People with flu should stay home from work and other activities. This not only helps in recovery, but also helps reduce the spread of flu to others.

### **What can be done to prevent the spread of influenza?**

The best way to prevent the spread of flu is to get vaccinated every year. Additional ways to help reduce the spread of flu are to wash your hands frequently, avoid close contact with those who have not been vaccinated or are ill, cover your coughs and sneezes, throw your tissues in the trash and stay home when you are sick.

### **Additional Information:**

Additional information is available at [www.ndflu.com](http://www.ndflu.com) or by calling the North Dakota Department of Health at 800.472.2180.

**The disease is a reportable condition. As mandated by North Dakota law, any incidence of this disease shall be reported to the North Dakota Department of Health.**

## **Shingles**

(Herpes Zoster, Varicella Zoster)

### **What is shingles?**

Shingles is an infection caused by the reactivation of varicella-zoster (chickenpox) virus within the body of someone who previously had chickenpox. The virus remains hidden in the body after chickenpox infection for many years and reoccurs later as shingles.

### **Who is at risk for shingles?**

Although it is most common in people older than 50, if you have had chickenpox, you are at risk for developing shingles. Shingles is also more common in people with weakened immune systems

from HIV infection, chemotherapy or radiation treatment, transplant operations, and stress.

### **What are the symptoms of shingles?**

Shingles causes blisters and red bumps, usually in a narrow area on half of the body. The lesions may be itchy or painful.

### **How soon do symptoms appear?**

Shingles usually occurs many years after having had chickenpox.

### **How is shingles spread?**

Shingles is spread by a person touching the blisters of someone who has shingles (direct contact). Shingles can cause chickenpox in people who have not been vaccinated or who have not had chickenpox.

### **When and for how long is a person able to spread the disease?**

A person is able to spread the virus until the blisters are covered with scabs.

### **How is a person diagnosed?**

A health-care provider will diagnose shingles. Sometimes a laboratory test is needed.

### **What is the treatment?**

There is no cure for shingles. The severity of shingles and how long the infection lasts can be significantly reduced if you are treated immediately with antiviral drugs. Antiviral drugs also may help hold off

the painful aftereffects of shingles. Other treatments also may be used to treat the symptoms of shingles.

### **Does past infection make a person immune?**

No.

### **Should adults be excluded from work, group settings or other activities if they have shingles?**

No, unless the rash cannot be covered. A person unable to participate in routine activities should also be excluded until well.

### **What can be done to prevent the spread of shingles disease?**

1. People 60 and older are recommended to be vaccinated against shingles.
2. Good hand washing is an effective way to prevent the spread of shingles.
3. People who have not previously had chickenpox or who have not been vaccinated against chickenpox should contact their health-care provider to be vaccinated.
4. Vaccination against chickenpox within three to five days after exposure to shingles may prevent disease from occurring.

Pregnant women or people with weakened immune systems who have not previously had chickenpox or who have not been vaccinated are who are exposed to shingles should notify their health-care provider immediately.

### **Additional Information:**

Additional information is available at [www.ndflu.com](http://www.ndflu.com) or by calling the North Dakota Department of Health at 800.472.2180.



## **HIV/AIDS AND OLDER ADULTS**

HIV (Human

Immunodeficiency Virus)

affects everyone and does not discriminate against gender, race and ethnicity, where one lives, and of course, age.

The 50-and-older population is the fastest growing population in the world. In 2008, the 50-and-over population comprised greater than 23% of the total United States population (5).

In 2007, the Centers for Disease Control and Prevention reported persons aged 50 and older accounted for approximately:

- 16% of new HIV/AIDS diagnoses (3)
- 27% of persons living with HIV (3)
- 33% of persons living with AIDS (1)

- 19% of all AIDS diagnoses (1)
- 38% of deaths of those living with AIDS (1)

Despite the documented cases, there are still older adults who are not aware of their HIV/AIDS status. This may be due to the following reasons:

1. Health care providers do not always test older people for HIV/AIDS and may miss cases during routine checkups.
2. People who are 50 years and older may mistake signs of HIV/AIDS for the aches and pains of normal aging.
3. They are less likely than younger people to get tested.
4. Older Americans know less about HIV/AIDS than younger people and may not know how it spreads or the importance of using condoms, not sharing needles, and getting tested for HIV.
5. Older people are less likely than younger people to talk about their sex lives

or drug use with their health care providers.

6. Health care providers may not ask older patients about their sex lives or drug use or talk to them about risky behaviors.

When someone knows he/she has HIV/AIDS, it is imperative to know and understand that there can be serious mental health issues associated, like depression. Depression may be a major problem for older people who may not have a strong network of friends or family who can help. People who are 50 and older may be coping with other diseases common to aging, like high blood pressure, diabetes, or heart disease. Older adults living with HIV/AIDS need support and understanding from their health care providers, family and friends (1).

Approximately 38-44% of adults have been tested for HIV. In addition to getting educated about the transmission of HIV/AIDS, getting tested for HIV is another way to reduce the

number of people infected with HIV. People can get their blood tested for HIV from their healthcare provider.

However, if someone does not have a healthcare provider, check your local listings for contact information to your health department, community organization or health center.

### **WHAT IS HIV AND AIDS AND WHAT ARE THE SYMPTOMS?**

- HIV (Human Immunodeficiency Virus) is a virus that compromises the immune system.
- A person who is HIV-positive can develop an opportunistic infection, which then can develop into AIDS (Acquired Immune Deficiency Syndrome).
- When the body becomes infected, initially, antibodies against HIV begin to form between 6-12 weeks.
- During the window period, flu-like symptoms can occur. Examples include fever, rash, muscle aches and swollen lymph nodes and glands, as well as unexplained weight loss, bruising, and chronic diarrhea.
- Without treatment, HIV usually progresses to AIDS between 8-10 years after infection with HIV.
- With treatment, symptoms may not be present for 15 years or longer (2).

### **RISK FACTORS FOR HIV TRANSMISSION –**

You may be at increased risk for infection if you have:

- Injected drugs or steroids, during which equipment (such as needles, syringes, cotton, water) and blood were shared with others.

- Had unprotected vaginal, anal, or oral sex (that is, sex without using condoms) with men who have sex with men, multiple partners, or anonymous partners.
- Exchanged sex for drugs or money.
- Been given a diagnosis of, or been treated for, hepatitis, tuberculosis (TB), or a sexually transmitted disease (STD) such as syphilis.
- Received a blood transfusion or clotting factor during 1978-1985.
- Had unprotected sex with someone who has any of the risk factors listed above.

## FACTS ABOUT HIV/AIDS

You may have read or heard things that are not true about how you get HIV/AIDS. Here are the FACTS:

- You cannot get HIV through casual contact, such as shaking hands or hugging a person with HIV/AIDS.
- You cannot get HIV from using a public telephone, drinking fountain, restroom, swimming pool, whirlpool, or hot tub.
- You cannot get HIV from sharing a drink.
- You cannot get HIV from being coughed or sneezed on by a person with HIV/AIDS.
- You cannot get HIV from giving blood.
- You cannot get HIV from a mosquito bite. (4)

## PROTECT YOURSELF, GET TESTED

### Locate HIV Testing Near You:

Send a text message with your ZIP code to KNOWIT (566948). Visit [HIVtest.org](http://HIVtest.org) or contact 1-800-CDC-INFO (1-800-232-4636) for assistance in locating a testing site. National HIV/AIDS and Aging Awareness Day is sponsored by the AIDS Institute. The AIDS Institute is a national nonprofit and

nonpartisan public policy research, advocacy, and education organization with offices in Washington, DC and Tampa, Florida. Begun as a grass roots community mobilization effort in the late 1980s, the AIDS Institute's mission is to promote action for social change through public policy research, advocacy, and education. THE AIDS INSTITUTE

**For more information about HIV/AIDS and Older Adults or to become involved with The AIDS Institute's National HIV/AIDS and Aging Awareness Day Campaign (September 18<sup>th</sup>), Please contact [Agging@TheAIDSInstitute.org](mailto:Agging@TheAIDSInstitute.org) or visit [www.TheAIDSInstitute.org](http://www.TheAIDSInstitute.org) for additional resources.**

#### Works Cited

1. Centers for Disease Control and Prevention. (2009). HIV/AIDS Surveillance Report. <http://www.cdc.gov/hiv/topics/surveillance/resources/reports/>
2. Epigee: "HIV Symptoms", 2009, [www.epigee.org/health/hiv/symptoms.html](http://www.epigee.org/health/hiv/symptoms.html)
3. Gay Men's Health Crisis. (2010). Growing Older with the Epidemic: HIV and Aging.
4. National Institute on Aging: "HIV, AIDS & Older People", March 2009, [www.nia.nih.gov/HealthInformation/Publications/hiv-aids.htm](http://www.nia.nih.gov/HealthInformation/Publications/hiv-aids.htm)

The Census Bureau. (2008). Age Data of the United States.

## Your Healthy Future

*I never exercised before, why start now?  
Am I exercising enough to help my heart?  
Does my diet need to change as I age?  
Does stress really affect my health?  
My doctor retired too, how do I find another?*

## YOUR HEALTH IS YOUR MOST IMPORTANT ASSET.

Yet when people are asked what concerns them the most in planning for retirement, their number one response is money. Money will not provide much satisfaction if you don't have your health! This chapter addresses the key areas that promote well-being: nutrition, exercise, choosing a physician, controlling and managing stress..

## What is Good Health?

In the past, good health was defined as freedom from disease or the absence of illness. The definition has expanded into the concept of wellness. Wellness is not only freedom from disease and resiliency when you are ill, but also having abundant energy and leading a balanced life. Philosophers, psychologists and theologians all have definitions of what a balanced life is. Most include having quality, relaxed time with loved ones while handling the tasks of daily living in a way that is comfortable for you. The emphasis is on taking responsibility for your own health. Delegating the task of keeping you healthy to physicians, hospitals or drugs doesn't have a part in the wellness concept.

## Portability

These plans are attractive because both your contributions and the earnings belong to you. Often, they can be rolled into another employer's 401k plan or an

IRA if you change jobs. If you are vested in the plan, your employer's matching contributions and earnings also belong to you and can also be moved. You may leave the funds with your employer if you meet certain minimum balance requirements. Unless you have a serious and immediate need for cash, you should either roll the funds into another qualified plan or leave them in place.

Source: *The Planning companion* by Rick Garnitz

## Credit Counseling Services



*Are you feeling overwhelmed by debt and looking for help?*

*A credit counseling services or debt management agency may be able to help you.*

Consumer credit counseling services and debt management agencies are nonprofit organizations supported mainly by contributions from community organizations, financial institutions and merchants. They provide services free or at a low cost to individuals seeking help. They can be effective alternatives to bankruptcy.

The agency will help you by negotiating a lower interest rate and reduced payment plan with your creditors.

Under the plan, you agree to deposit money each month in

an account with the agency. The agency then distributes this money to your creditors to repay your debts. The repayment plan may take several years to complete.

Although a payment plan may help eliminate much of the stress that comes from dealing with creditors and overdue bills, it does not mean you can forget about the remaining debts.

- If the repayment plan depends on a creditor lowering interest rates or eliminating finance charges, **you** are responsible for making sure those concessions are reflected in the billing statements.

## Debt Management Agencies

- You also are responsible for paying off any creditors whose accounts are not included in the plan.

## What should you expect?

Under North Dakota law, consumer credit counseling services must meet certain minimum requirements, including:

- Any agreement between a credit counseling service and a debtor must be in writing and signed by both parties with a copy given to the debtor.

- A credit counseling service may not charge an origination fee exceeding \$50 and cannot charge service fees exceeding 15% of each distribution payment.

- A credit counseling service entering into an agreement with a debtor who resides in North Dakota **must** file a surety bond with the Office of Attorney General.

- Once the debtor makes a deposit, the consumer credit counseling service must make the disbursement of funds within forty-five days.

**CAUTION:** Not all credit counseling services or debt management agencies are legitimate.

Some agencies only offer debt management plans. Local North Dakota agencies usually provide a full range of services, including a free consultation, debt management, budgeting and other assistance or counseling programs.

Different agencies charge more for similar services and some unscrupulous companies disguise extra charges.

- Get a written explanation of all charges you will be expected to pay.

The Attorney General has received complaints against credit counseling and debt management companies that

charge excessive fees or do not send the debtor's payments to the creditor.

***Before making a choice, consider the advantages of working with a reputable local agency.***

*The Village Family Service Center, 1726 S Washington St, Grand Forks, ND 58201  
701-746-4584*



## **Creating a Productive Working Environment**

### **Provide a Positive Atmosphere**

If we want employees to be creative and productive, we need to provide an atmosphere that encourages positive performance. We must also be sensitive to people and to know why they respond to supervision as they do. The better we know the employees we supervise, the more effective we will be in providing guidance and direction.

### **Set a Positive Example**

As a supervisor, your behavior will be observed by staff members on an ongoing basis. You have high visibility with subordinates and when you set a pattern, you demonstrate the course your staff will most likely follow.

### **Teach Your Staff the Specifics of Their Jobs**

Every supervisor is responsible to train and develop subordinates.

Effective supervision carries with it the responsibility to make sure the individual has the required skills and knowledge to do the job. Time devoted to training and motivating people will reduce your own supervisory burdens and enrich the jobs of others.

### **Set Minimum Standards of Performance**

Employees are more effective when they know where they stand with their supervisors and when they understand what is expected of them. Once such standards are established, let staff members know you believe in them and that you believe they are capable of not only meeting, but surpassing your expectations.

### **Make Known What is Valued By You and Your Organization**

Stress the need for ethics and honesty. Promote positiveness in behavior and outlook for all employees, including yourself. Always recognize enthusiasm and the genuine efforts of the employees you supervise. You can inspire initiative if you help your staff take control of their responsibilities well enough to make things happen in a productive manner.

## **The New Health Care Law Timeline: When Changes Come About**

Congress enacted a new health care law which brings a number of benefits for all

Americans, including people over 50. Some of these changes you will see this year. Others phase in over the next several years.

### **2010**

- Those who reach the Medicare Part D coverage gap or "doughnut hole" receive a \$250 rebate to help pay for prescription drugs.
- Employers providing retiree health insurance get funding to encourage continued coverage to early retirees.
- Temporary insurance, also known as "high risk pools" begins covering people who have a pre-existing condition and have been without insurance for the last 6 months.
- Young adults up to age 26 can remain on their family's health insurance plan.
- Individuals with new employer-based or individual insurance plans do not have to pay a deductible and other out-of-pocket costs for certain preventive care services.
- Insurance companies can't drop your coverage if you become sick.
- Insurance companies can't place lifetime limits on health coverage. They are also restricted from using

arbitrary annual limits on your health coverage.

## 2011

- Those who reach the Medicare doughnut hole receive a 50 percent discount on brand-name prescription drugs.
- Medicare benefits expand to include free coverage for wellness and preventive care.
- It becomes easier to file complaints about the quality of care in a nursing home. Better access to information on nursing home quality and resident rights is available.

## HEALTH CARE and You 2011

- Those who reach the Medicare doughnut hole receive a 50 percent discount on brand-name prescription drugs.
- Medicare benefits expand to include free coverage for wellness and preventive care.
- It becomes easier to file complaints about the quality of care in a nursing home. Better access to information on nursing home quality and resident rights is available.

## 2014

- Exchanges begin offering health insurance coverage with comprehensive benefits.

- Premium subsidies are available for those with limited incomes who purchase health insurance through an exchange.
- Children, parents and childless adults who do not have Medicare and who have a limited income are able to apply for Medicaid.
- Insurance companies are banned from putting annual limits on health coverage.
- Insurance companies can't deny anyone health coverage because of a pre-existing condition.
- Spouses of people on Medicaid who receive care services at home get the same protections for income and other resources as spouses of those on Medicaid who live in nursing homes.

## 2020

- Medicare Part D coverage gap or "doughnut hole" is completely closed.

### Improvements to Preventive and Wellness Benefits

A primary goal of the new health care law is to improve health insurance coverage for all people. But many people may not be aware of new prevention and wellness provisions that could save individuals and families hundreds of dollars a year. Under the new law, insurers must offer proven preventive services – like immunizations, cancer screenings and checkups – to you at no

additional out-of-pocket charge.

### For People with Insurance:

The health care law requires all new health plans to cover important preventive and wellness benefits with no deductibles and co-payments. Examples include services such as immunizations and screenings for cancer or diabetes. This requirement applies to new individual and group insurance plans and is effective this year.

### For People with Medicare:

Starting in 2011, Medicare will pay for an annual wellness visit and a personalized prevention plan.

The personalized prevention plan may include the following:

- An assessment of your health risks.
- Your updated medical history.
- A list of your current health care providers.
- A list of your current prescription medications.
- Your height, weight and blood pressure measurements.
- A screening schedule for appropriate preventive services for you to follow over the next five to ten years.
- A list of your health risk factors along with treatment options.

Medicare will also continue to cover a Welcome to Medicare physical exam for people who are new to the Medicare

program. The Welcome to Medicare exam is free, with no deductibles and co-payments. Those who are new to Medicare cannot get both the Welcome to Medicare exam and the annual wellness visit during their first 12 months of enrollment. The Welcome to Medicare exam is available during the first 12 months of enrollment into the Medicare program. The annual wellness visit takes place each year after that.

For those with a Medicare Advantage plan, most of these plans offer Medicare-covered preventive services with no deductibles and co-payments. The new health care law does not require Medicare Advantage plans to offer preventive services free of charge. If you have a Medicare Advantage plan you should check with your plan to confirm what the deductibles and co-payments are for preventive services, if any.

### **The New Health Care Law: Helping You Pay for Long-Term Care**

Under the new health care law, you will be able to participate in a voluntary national insurance program that will provide case benefits to you if you have a qualifying disability that limits your day-to-day living and you meet other eligibility criteria. This new program is called CLASS. CLASS stands for Community Living Assistance Services and Supports. You can use this insurance to help pay for non-medical services

and supports, such as home modification, assistive technology, transportation and personal care. You can also use it to pay part of the cost of assisted living or nursing home care.

### **How the CLASS Program Works:**

If you are age 18 or older, employed, and your employer participates in the program, you will be enrolled in the CLASS program automatically unless you choose not to participate, or “opt out.” You would pay the premiums through payroll deductions. You will be able to purchase this insurance even if your employer doesn’t participate, if you are self-employed, or have more than one employer.

Once you have paid the premiums for at least five years, have worked at least three of those initial five years, have a qualifying disability and meet other eligibility requirements, you will be eligible for benefits. Case benefits will be paid if you have a qualifying disability expected to last more than 90 days and your health care provider certifies this. These payments will continue as long as you remain eligible, which could be for your lifetime.

You will likely be able to enroll in the CLASS program in 2012 or 2013. Federal officials will provide additional details as the new insurance program is implemented. These include premium costs

and the amount of cash benefits.

Participating in CLASS increases your options to live more independently if you have or develop a qualifying disability and meet the other eligibility requirements. You can use the cash benefit, along with other public and private programs, your personal savings, care from family and friends, and private long-term care insurance, to help protect your financial security.

Check [www.aarp.org/getthefacts](http://www.aarp.org/getthefacts) Frequently for the latest information. Reprinted: ND AARP

### **New Law Creates Office of Financial Protection for Older Americans**

On July 21, 2010, President Obama signed the Dodd-Frank Wall Street Reform and Consumer Protection Act. The bill creates a new Consumer Financial Protection Bureau charged with protecting consumers, including older adults, in the financial arena. The precise effective date for the start of the CFPB and any statutory changes will be chosen by the Treasury Secretary shortly and will likely be in mid 2011.

The CFPB must establish an Office of Financial Protection for Older Americans to promote the financial literacy of seniors in order to protect them from unfair, deceptive and abusive practices and to guide their financial choices.

The duties of the office include:

- establishing goals for programs that provide seniors financial literacy and counseling;
- monitoring certifications of financial advisors;
- research on best practices and other strategies to educate and

- counsel seniors about personal finance management; and
- coordinating consumer protection efforts with other federal and state agencies and community groups.

The legislation establishing the CFPB requires the Bureau to undertake several initial studies, including one on reverse mortgages to identify unfair practices and to determine the suitability of reverse mortgages for purposes of funding investment products.

## **Home & Community-Based Services**

North Dakota's Medicaid Waiver for the Aged and Disabled

### **Background:**

North Dakota provides home and community-based services through several programs, which each serve different needs. These programs include:

- Service Payments for the Elderly and Disabled (SPED) Program, Expanded Service payments for the Elderly and Disabled (Expanded-SPED) Program,
- Medicaid State Plan Personal Care, and
- Medicaid Waivers for home and community-based services.

*The waivers give eligible people a choice between living in a nursing home or living in their homes and communities.*

In 1981, the federal government acknowledged that the Medicaid Program had a bias toward funding institutional care, such as

nursing homes. Home and community-based services (HCBS) waivers were developed to counter that bias, with the stipulation that the cost of community support services cannot exceed institutional care costs.

North Dakota's Medicaid HCBS waiver is an agreement between the Center for Medicare & Medicaid Services (CMS) and the State's Medicaid Agency – the North Dakota Department of Human Services. This waiver helps eligible individuals who would otherwise require services provided in a nursing home to remain at home or in the community.

The SPED Program, the Expanded-SPED Program, and the Medicaid State Plan – Personal Care Program also fund home and community-based services. A separate fact sheet is available through the Department of Human Services' Medical Services Division, which explains eligibility criteria and the services provided under these programs.

### **Did You Know:**

- People served under the Medicaid waiver for home and community-based services qualify physically for nursing home admission, but choose to receive supportive care services in their homes and communities.
- In federal fiscal year (FFY) 2008, it cost an average of \$880 per month to provide services to a Medicaid

client under the waiver. This is for services only. Clients pay for living expenses.

### **Covered Waiver Services:**

- **HCBS Case Management** – Assesses needs, helps with care planning, provider selection, referrals and service monitoring.
- **Respite Care** – Provides temporary relief to full-time caregivers.
- **Adult Family Foster Care** – Provides a safe, supervised family living environment, 24-hour per day in a state licensed setting.
- **Chore Service** – Includes snow removal and heavy cleaning.
- **Homemaker Service** – Provides house cleaning, laundry, and/or meal preparation services.
- **Emergency Response System (Lifeline)** – Provides telephone emergency response.
- **Non-Medical transportation** – Transports or escorts client for essential needs, such as grocery shopping, social security office visit, etc.
- **Adult Day Care** – Provides at least three hours per day of attended care in a group setting.
- **Environmental Modification** – (Limited) Modifies the home to enhance client's independence (e.g. install safety rails).
- **Specialized Equipment** – Provides special equipment reducing the need for human help.
- **Adult Residential Services** – Available to individuals living in a social model Alzheimer's & TBI facilities.
- **Transitional Living Service** – Provides training for the recipient to live with greater independence in the home.
- **Supported Employment** – Assistance in activities needed to sustain paid employment for disabled individuals.
- **Extended personal Care / Nurse Education** – Education provided by a nurse, to

providers who provide hands-on care of a medical nature that is specific to the needs of eligible individuals.

- **Home Delivered Meals –** Nutritious meals delivered to the home of eligible individuals.
- **Family Personal Care –** Reimburses a spouse for providing personal care or similar services.

**To Apply for Services:**  
Contact the County Social Service Office in Your Area.

### **Another Resource:**

North Dakota Aging & Disability Resource Link  
1-800-451-8693  
[www.carechoice.nd.gov](http://www.carechoice.nd.gov)  
[carechoice@nd.gov](mailto:carechoice@nd.gov)

August 10, 2010, the National Association of States United for Aging and Disabilities, NASUAD, (formerly NASUA) is launching their newly redesigned website at its new web address:  
[www.nasuad.org](http://www.nasuad.org).

Features of the new website include:

- The “Affordable Care Act” section, which outlines the new health reform law and what it means for state agencies. This section includes NASUAD produced materials concerning the new law; an outline of grant opportunities for the states; and guidance from CMS, including State Health Official and State Medicaid Director letters.
- An updated “Federal Policy” section which outlines NASUAD’s work on various aging, disability and health policy issues.
- And an easier to navigate design and layout.

Please take a moment to check out the new features at [www.nasuad.org](http://www.nasuad.org).

## **Telephone Numbers to Know**

**Regional Aging Services Program Administrator**  
**Region IV - Patricia Soli**  
**1-888-256-6742**

*North Dakota Aging and Disability Resource-LINK:*  
**1-800-451-8693**

<http://www.carechoice.nd.gov>

Region IV Aging Services newsletter at the following link:

<http://www.nd.gov/humanservices/info/pubs/aging.html>

### **Vulnerable Adult Protective Services**

**Region IV – Vulnerable Adult Protective Services, Patricia Soli – 1-888-256-6742.**

**Direct referral Grand Forks County Social Services VAPS - 701-797-8540.**

RaeAnn Johnson, contact for Vulnerable Adult Team (VAT) and Education–  
1-888-256-6742.

Long Term Care Ombudsman  
**1-888-607-8610.**

**ND Family Caregiver**  
**Region IV - Raeann Johnson**  
**– 1-888-256-6742**

### **Other**

- Aging Services Division Office and Senior Info Line: **1-800-451-8693**
- AARP: **1-888-OUR-AARP (1-888-687-2277)**
- AARP Pharmacy: **1-800-456-2277**
- ND Mental Health Association: **701-255-3692**
- ND Mental Health Association Help-Line: **1-800-472-2911**
- **IPAT** (Interagency Program

for Assistive Technology):  
**1-800-265-4728**

- Legal Services of North Dakota: **1-800-634-5263** or **1-866-621-9886** (for persons aged 60+)
- Attorney General's Office of Consumer Protection: **701-328-3404** or **1-800-472-2600**
- Social Security Administration: **1-800-772-1213**
- Medicare: **1-800-247-2267/1-800-MEDICARE**  
Toll-Free 800 Information: (Directory Assistance for 800 number listings): **1-800-555-1212**
- Senior Health Insurance Counseling (SHIC) ND Insurance Department: **1-701-328-2440**
- Prescription Connection: **1-888-575-6611**

### **Energy Assistance**

**For more information on energy assistance programs call:**

- Grand Forks County Social Services: (701) 787-8500.
- Red River Valley Community Action: (701) 746-5431.
- The Salvation Army: (701) 775-2597.
- St. Vincent de Paul: (701) 795-8614.

### **Local energy contacts:**

- Excel Energy: (800) 895-4999 (residential customer service).
- NoDak Electric Cooperative: (701) 746-4461.